



Pre-Hearing Conference Request (Appeals)

Dated:

Claimant ID/SSN.:

Docket No.:

In accordance with the provisions of 56 Ill. Adm. Code 2725.205, (*Check One*) (Claimant Employer), in the above referenced Docket Number, hereby requests that the (*Check One*) (Referee Director's Representative) to issue an Order for Pre-Hearing Conference for a date and time certain. A pre-hearing conference is required for the following reasons:

I certify that a copy of this Pre-Hearing Conference Request was served on all parties.

Signature (Claimant / Employer)

Signature (Attorney / Representative)
For
(Claimant / Employer)

Illinois Department of Employment Security
33 South State Street
8th Floor
Chicago, Illinois 60603-2802
www.ides.illinois.gov

Chicago: 1-800-821-3550 Springfield: 1-800-423-2458
Fax: 1-312-793-1119 Fax: 1-217-524-7824